## 11/03/2004 WED 14:48 FAX 650 474 8401 GLENN PATENT GROUP BEST AVAILABLE COPY

Student the Processor's Reduction Act of 1993, on paragon are the	· U.S. Pale	Approved for one through 07/0; and Tradomert Office; U.S. DEPART on of inferresion voters it contains as	MENT OF CO	MUERCE			
Request	Application Numi	001449 449					
for	Filing Date	11/22/1999 .1					
Continued Examination (RCE)	First Named Inve						
Transmittal		2177	NOV	3 20			
fall Stop RCE	Art Unit	Dodds, M.					
ommissioner for Patents P.O. Box 1450	Examiner Name						
Alexandria, VA 22313-1450	Attorney Docket						
his is a Request for Continued Examination (RCE tequest for Continued Examination (RCE) practice under 37 995, or to any design application. See instruction Sheet for I	GFR 1.114 does not app RGEs (not to be submitte	y to any utility or plant application to the USPTO) on page 2.	lied prior to				
<ul> <li>Submission required under 37 CFR 1.114 same amendments and closed with the RCE-will be entered in applicant does not wish to have any previously titled unamendment(s).</li> </ul>	the order in which they w entered emendment(s) a	ere filed untess applicant instructs ntered, applicant must request non	otherwise. If centry of suc	R.			
Previously submitted. If a final Office action considered as a submission even if this box		dimensis filled effer the final Office o	ction may be				
i. Consider the arguments in the Appeal	Brief or Rely Brief provid	usly filed on	_				
8. Other	·			:			
b. Enclosed							
i. 🗹 Amendment/Reply	at. 🗆	Information Disclosure Statement	(1DS)				
ii. Affidavlitely Declaration(e)	w. 🔽	Other RCE					
Miscellaneous	_						
Suspension of scalars on the above-Identific	ed application is requests	d under 37 CFR 1.103(c) for a		٠.			
a. Deriod of months. (Period of euspi	em C bossue los leste nolens	nthis: Fee under 37 CFR 1.17(f) require	ŋ				
Fees The RCE fee under 37 CFR 1.17(a) is requ	ared by 37 CFR 1,114 wh	en the RCE is filed.		•			
a. Deposit Account No. 07-1445	the following fees, or ca	edit any overpsyments, to					
i. RCS fee required under 37 CFR 1.17	(a) (Large Entity fee of \$	770.00)		: -			
5. Extension of time fee (37 CFR 1.136 an	d 1.17)			: .			
ii. Other	•	<u> </u>		_			
b. Check in the amount of \$		enclased	•				
c. Payment by credit card (Form PTO-2006 and	ineed)	· .	•	:			
WASUENG: Information on this form be included on this form. Provide of			ł				
	CANT, ATTORNEY, OR		184.004				
Name (Printrype)   Julia A. Thomas Signature   Sulta A. Shorn	~~0	Registration No. (Asomey/Agent Date November 3, 2004	(52,283				
	OF MAILING OR TRAN						
hereby certify that this correspondence is being deposited with the U difference for Mail Stop ROS, Commissioner for Peterto, P. O. Box 1- Mos on the date shown before.	Inited States Postal Service :	ion scribilent postage as first class mai	in en envelop Petent and Tr	redemark			
Senstere Delta Revento		Date November 3, 2004		<del>,                                     </del>			
Signature Alkertacker		i www intovernour 3, 2004					

PAGE 1918 \* RCVD AT 11/3/2004 5:44:04 PM (Eastern Standard Teme) \* SVR:USPTO-EFXRF-1/2 \* DNB:8/20306 \* CSED:650 474 8401 \* DURATION (mm-ss):08-40

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

0944744B

CLAIMS AS FILED - PART I								SMALL E	ENTITY		OTHER		
		(Column 1)		(Column 2) NUMBER EXTRA		_ ا	TYPE		OR	SMALL			
FO	R <u> </u>		NUMBE	R FILED		NOWREH	EXIHA		RATE	FEE		RATE	FEE
BASIC FEE				·			380.00	OR	<u>:</u> .	760.00			
TOTAL CLAIMS minus 20=			• 7			X\$ 9=		OR	X\$18= {	No			
INDEPENDENT CLAIMS 9 minus 3 =					3 =	* (p			X39=		OR	X78=	ULAB
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2								L	TOTAL		OR	TOTAL	1354
TechanocLAIMS AS AMENDED - PART II  1-3-0 (Column 1) (Column 2) (Column 3)									SMALL E	ŅTITY	OR	OTHER SMALL	
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								ן י	+130=		OR	+260=	
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* If the entry in column 1 is less than the entry in column 2, write *0* in column 3.								OR	+260=				
-	If the "Highest Nu	mber Pr	eviously F	aid For IN TH	IIS SP	ACE is less th	an 20, enter *20	<sup>),*</sup> A	DDIT. FEE		OR	ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													